Appl. No. 10/643787   PATENT
Amdt. dated May 31, 2005
Reply to Office Action of April 29, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Confirmation No. 4790

    Truckai, Csaba   Examiner: ROANE, AARON F

Application No.: 10/643787   Technology Center/Art Unit: 3739

Filed: August 19, 2003   RESPONSE TO RESTRICTION
                                              REQUIREMENT
For: ELECTROSURGICAL WORKING
END FOR CONTROLLED ENERGY
DELIVERY

Customer No.: 20350

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

    In response to the Office Action mailed April 29, 2005, please enter the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

Page 1 of 6

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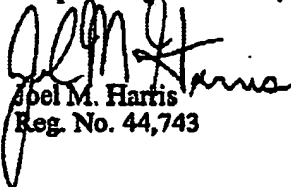Reply to Office Action of April 29, 2005

<u>CONCLUSION</u>

In view of the foregoing, Applicants believe all claims now pending in this Application are in condition for allowance. The issuance of a formal Notice of Allowance at an early date is respectfully requested.

If the Examiner believes a telephone conference would expedite prosecution of this application, please telephone the undersigned at 650-326-2400.

It is believed that no fees are due with this response; however, should any fees be required under 37 C.F.R. § 1.16 to 1.21 for any reason, the Commissioner is authorized to charge Deposit Account No 20-1430.

Respectfully submitted,

Joel M. Harris
Reg. No. 44,743

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
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Attachments
JMH:snb
60480500 v1

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10643787

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	21	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20 minus 20 =	0
INDEPENDENT CLAIMS	2 minus 3 =	6
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE		RATE	FEE
BASIC FEE	385.00		OR	BASIC FEE	770.00
X$ 9=			OR	X$18=	
X43=			OR	X86=	
+145=			OR	+290=	
TOTAL	375		OR	TOTAL	

CLAIMS AS AMENDED - PART II

2202

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	24	Minus	20	= 4
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=	100.70	OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.